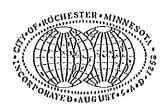


ROCHESTER



FIRST CLASS CITY . FIRST CLASS SERVICE

ETHICS ORDINANCE DISCLOSURE FORM



JUDY SCHERR, CMC City Clerk 201 4th Street SE, Room 135 Rochester, MN 55904-3742 (507) 328-2900 FAX #(507) 328-2901

NAME:	
ADDRESS: 123 9th Ave. NW	
CITY, STATE, ZIP CODE Rochester, MN 55901	

- 1. What is the name of your position, title or job title with the municipality or City? Planning and Zoning Commissioner
- 2. Is this an employed, appointed, or elected position?
 Appointed
- 3. What is the name of the City department in which you are employed, or City board, commission or elected body on which you serve?
 Planning and Zoning Commission
- 4. When were you hired, appointed or elected to this position?
 Appointed

For questions 5, 6 and 7, the word "interest" means a substantial financial interest through your ownership of stocks, bonds, notes or other securities. The word "interest" also includes an interest arising from blood, marriage or other personal relationships or close business or political association. The phrase "doing business" means engaged in any contractual relationship with the City or making application for such relationship or for any relief or benefit available from the City including, but not limited to, variance, permit, license or plat approval.

(SEE REVERSE SIDE)

Ethics Ordinance Disclosure Form Page Two

5. Please list your interests in real property within the City of Rochester, other than your homestead. Complete on a separate page if necessary.

None

6. Please list any interests you have in a business doing business with the City. I am a shareholder with my employer, CRW architecture + design group.

7. Please list any interest you have in any business located within, or doing business in, the City.

I am a shareholder with my employer, CRW architecture + design group.

8. List any and all employment.

Architect at CRW architecture + design group

9. List any and all community, civic, or nonprofit organization of which you are a member. If you also serve in any such organization in a leadership or decision-making capacity, please note that capacity. (Please attach a sheet if additional space is needed.)

Design Rochester - board member C4 - board member Kutzky Park Neighborhood Association

I hereby certify that the above information is complete and accurate.

Signature

Date

Please mail completed and signed form to: Judy Schert, CMC, City Clerk, City Hall, 201 4th Street SE, Room 135 Rochester, MN 55904-3742 05-16-13